## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.



RECO S.Z.O.

JUL 15 2004

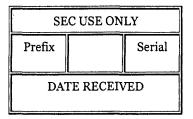
1026

OMB APPROVAL

OMB Number: 3235-0076

Expires: May 31, 2005

Estimated average burden hours per response... 1



#### FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

PROCESSED

JUL 2 0 2004 E

Name of Offering (check if this is an amend	lment and name	has changed, and	l indicate change.	)	•	
PARTNERSHIP UNITS IN CARRAMERIC	A REALTY OPE	RATING PARTN	ERSHIP, L.P.			
Filing Under (Check box(es) that apply):	[ ] Rule 504	[ ] Rule 505	[✓] Rule 506	[]Section 4(6) []ULOE		
ype of Filing: [X] New Filing [ ] Amendment						
	A. BASIC II	DENTIFICATIO	N DATA		-	
1. Enter the information requested about t	he issuer					
Name of Issuer (check if this is an amendm CarrAmerica Realty Operating Partn						
Address of Executive Offices (Numb 1850 K Street, N.W., Suite 500, Washington	,	ity, State, Zip Cod	, ,	Number (Including Area Code) 2-729-1700	-	

	A. I	BASIC IDEN	TIFICATIO	ON DATA		
Address of Principal I (if different from Exe	Business Operations (Numb cutive Offices)	er and Street	, City, State,	Zip Code)	Telephone Numbe	r (Incl. Area Code)
of CarrAmerica Realt	Susiness Operating Partnership, L.P. (" y Corporation (the "REIT") ir at to which the REIT will hold	nto a structur	e known as a	n "Umbrella	Partnership Real Est	ate Investment Trust"
Type of Business Organization						
[] corporation	[ ✓ ] limited partnership, this filing	formed as pa	art of [] ot	ther (please s	specify):	
[ ] business trust	[ ] limited partnership, to	be formed				
		Month	Year			
Actual or Estimated I Organization:	Date of Incorporation or	[0][3]	[0][4]	[✓] A	ctual (newly formed)	[ ] Estimated
(Enter two-letter U.S.	. Postal Service abbreviation f r other foreign jurisdiction)	for State:	[ M ][I	)]		

## GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under <u>Regulation D</u> or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

	<del></del>	A. BASIC	IDENTIFICATION D	ATA	
<ul> <li>Each benefici equity security</li> <li>Each executive issuers; and</li> </ul>	er of the issuer, if that al owner having the ties of the issuer;	ne issuer has bed e power to vote cor of corporate	issuers and of corporate	vote or dispositio	on of, 10% or more of a class of aging partners of partnership
Check Box(es) that Apply:	[ ] Promoter	Beneficial C	Owner [ ] Executive Officer	[] Director	[✓] General Partner/Limited Partner
Full Name (Last nar CarrAmerica Realty		ıl)			
Business or Residen 1850 K Street, N.W.			and Street, City, State, 2 06	•	729-1700
Check Box(es) that Apply:	[ ] Promoter	Beneficial C	Owner [ ] Executive Officer	[] Director	[ Limited Partner
Full Name (Last nar CarrAmerica OP, LI		ıl)			
Business or Residen 1850 K Street, N.W.		(Number ngton, D.C. 200	and Street, City, State, 2 06	Zip Code)	
Check Box(es) that Apply:	[ ] Promoter	Beneficial Owner	[ ] Executive Officer	[ ✓ ] Director (GP)	[ ] General and/or Managing Partner
Full Name (Last name Brimmer, Andrew F.	first, if individual)				
Business or Residence CarrAmerica Realty Co			nd Street, City, State, Zip uite 500, Washington, D		
Check Box(es) that Apply:	[ ] Promoter	Beneficial Owner	[✓]Executive Officer	[✓] Director (GP)	[ ] General and/or Managing Partner
Full Name (Last name Hawkins, Philip L.	first, if individual)				
Business or Residence CarrAmerica Realty Co			nd Street, City, State, Zip nite 500, Washington, D.		
Check Box(es) that Apply:	[ ] Promoter	Beneficial Owner	[ ] Executive Officer	[✓] Director (GP)	[ ] General and/or Managing Partner
Full Name (Last name Howard, Timothy	first, if individual)				
Business or Residence CarrAmerica Realty Co			nd Street, City, State, Zip nite 500, Washington, D.		

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [] Director (GP) Managing Partner  Full Name (Last name first, if individual)  Carr, Thomas A.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006  Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [] Director (GP) Managing Partner  Full Name (Last name first, if individual)  Williams, Jr., Wesley S.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006  Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [] Director (GP) Managing Partner  Full Name (Last name first, if individual)  Torray, Robert E.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006  Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [] General and/or Managing Partner
Carr, Thomas A.  Business or Residence Address (Number and Street, City, State, Zip Code) CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006  Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [/] Director (GP) Managing Partner  Full Name (Last name first, if individual) Williams, Jr., Wesley S.  Business or Residence Address (Number and Street, City, State, Zip Code) CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006  Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [/] Director (GP) Managing Partner  Full Name (Last name first, if individual) Torray, Robert E.  Business or Residence Address (Number and Street, City, State, Zip Code) CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006
CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006  Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [] Director [] General and/or Managing Partner  Full Name (Last name first, if individual)  Williams, Jr., Wesley S.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006  Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [] Director [] General and/or Apply: (GP) Managing Partner  Full Name (Last name first, if individual)  Torray, Robert E.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006
Apply: Owner (GP) Managing Partner  Full Name (Last name first, if individual)  Williams, Jr., Wesley S.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006  Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [/] Director [] General and/or Apply: (GP) Managing Partner  Full Name (Last name first, if individual)  Torray, Robert E.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006
Williams, Jr., Wesley S.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006  Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [✓] Director [] General and/or Apply: (GP) Managing Partner  Full Name (Last name first, if individual)  Torray, Robert E.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006
CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006  Check Box(es) that [] Promoter [] Beneficial [] Executive Officer [] Director [] General and/or Apply: (GP) Managing Partner  Full Name (Last name first, if individual)  Torray, Robert E.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006
Apply: Owner (GP) Managing Partner  Full Name (Last name first, if individual)  Torray, Robert E.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006
Torray, Robert E.  Business or Residence Address (Number and Street, City, State, Zip Code)  CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006
CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006
Check Box(es) that [ ] Promoter [ ] Beneficial [ ] Executive Officer [ ] Director [ ] General and/or
Apply: Owner (GP) Managing Partner
Full Name (Last name first, if individual) Carter, Joan
Business or Residence Address (Number and Street, City, State, Zip Code) CarrAmerica Realty Corporation, 850 K Street, N.W., Suite 500, Washington, D.C. 20006
Check Box(es) that [ ] Promoter [ ] Beneficial [ ] Executive Officer [ ] Director [ ] General and/or Apply: Owner (GP) Managing Partner
Full Name (Last name first, if individual) Riffee, Stephen E.
Business or Residence Address (Number and Street, City, State, Zip Code) CarrAmerica Realty Corporation, 1850 K Street, N.W., Suite 500, Washington, D.C. 20006

A. BASIC IDENTIFICATION DATA								
Check Box(es) that Apply:	[ ] Promoter	[]	Beneficial Owner	[ ] Executive Officer (GP)	[ ] Director (GP)	[]	General and/or Managing Partner	
Full Name (Last nam Dorigan, Karen B.	e first, if individua	l)						
Business or Residenc CarrAmerica Realty C		K Str		nd Street, City, State, Zip nite 500, Washington, D.				
Check Box(es) that Apply:	[ ] Promoter	[]	Beneficial Owner	[✓]Executive Officer (GP)	[ ] Director (GP)	[]	General and/or Managing Partner	
Full Name (Last name Madrid, Linda A.	e first, if individua	1)						
Business or Residenc CarrAmerica Realty C		K Str		nd Street, City, State, Zip nite 500, Washington, D.				
	(Use blank shee	t, or	copy and u	se additional copies o	of this sheet, a	s nec	essary.)	

				]	B. INFO	RMATIC	ON ABO	UT OFF	ERING				
1. H	as the iss	uer sold,	or does th	e issuer	intend to	sell, to no	on-accred	ited inve	stors in th	nis offerir	ıg?	Yes []	No [✓]
				Answei	r also in A	ppendix,	Column	2, if filing	under U	LOE.		LJ	[*]
2. W	/hat is the	minimu	m investn	nent that	will be ac	cepted fr	om any ii	ndividual	?		\$_	NONE	
3. D	Does the offering permit joint ownership of a single unit?								Yes	No			
4. E ir w b	nter the indirectly, and it is ales of the contract of the con	nformation any comr of securiti ealer reg of more the	on request nission of es in the distered wi han five (	ted for ear r similar offering. th the SI (5) perso	ich person remuner If a perso EC and/on ns to be l	who has ation for n to be li with a s listed are	s been or solicitati sted is an tate or sta associat	will be pa on of pur associate ates, list t	nid or give rchasers i ed person the name ns of suc	en, direct in connect or agent of the br h a broke	ly or ction of a oker er or	[ ] NON	[ <b>/</b> ]
Full N	ame (Las	t name fir	st, if indi	vidual)		<del>-</del> :			W 1	· · · · · · · · · · · · · · · · · · ·			
Busin	ess or Res	idence A	ldress		(Numb	er and St	reet, City	, State, Z	ip Code)				
Name	of Associ	ated Brok	er or Dea	ler									
	in Which k "All Stat											ll States	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT] [RI]	[NE] [SC]	[NV] [SD]	(NH) [TN]	[NJ] [TX]	(NM) [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
					[01]	[[1]	[VA]	[WA]	[VV V]	[ 1 1 ]	[VV I]	[FK]	
rull N	ame (Last	name ni	st, it indi	vidual)									
Busin	ess or Res	idence Ad	ldress		(Numb	er and St	reet, City	, State, Z	ip Code)				
Name	of Associa	ated Brok	er or Dea	ler								<del> </del>	
	in Which									<del>-</del>	f 7 41	11 04-2	
(Chec [AL]	k "All Stat [AK]	es" or che	eck indivi [AR]	dual Stat	es) [CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[ J AJ [HI]	ll States [ID]	
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]	
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[wv]	[WI]	[WY]	[PR]	

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OR PROCEEDS

1,	total amount already sold. Enter "o" if answer is "none" or "zero." If the transaction is an exchange offering, check this box [/] and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Amount Offered for Exchange	Amount Already Exchanged
	Debt	\$ <u> </u>	\$ <u> </u>
	[ ] Common Stock of the REIT, into which Common Units are exchangeable <sup>1</sup> [ ] Preferred	\$ <u> </u>	\$o
	Convertible Securities (including warrants):	\$ <u> </u>	\$ <u> </u>
	Partnership Interests: Limited Partnership Interests in the form of units ("OP Units") <sup>2</sup>		
	<ul> <li>(i) Class A common units of limited partnership interests in the OP</li> <li>("Common Units")</li> <li>(ii) Series E Cumulative Redeemable Preferred Partnership Units</li> <li>("Series E Units")</li> </ul>	\$ <u>2,816,570,000</u>	\$ <u>2,816,570,000</u>
		\$o	\$ o
	Other (Specify). Total	\$ <u>2,816,570,000</u>	\$ <u>2,816,570,000</u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number of Investors	Value of Securities Exchanged
	Accredited Investors	2	\$2,816,570,000
	Non-accredited Investors	0	\$
3.	If this filing is for an offering under <u>Rule 504</u> or <u>505</u> , enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.	Type of	Dollar
	Type of offering	Security	Amount Sold
	Rule 505	<u>N/A</u> <u>N/A</u> N/A	<u>N/A</u> <u>N/A</u> N/A

<sup>&</sup>lt;sup>1</sup> Each Common Unit is exchangeable by a unitholder at its election for either (a) one share of common stock of CarrAmerica Realty Corporation, a publicly traded REIT incorporated in Maryland in 1992 ("REIT"), or (b) cash equivalent (at the REIT's option). The Series E Units are redeemable for cash only.

<sup>&</sup>lt;sup>2</sup> The REIT, as general partner of the OP, owns a substantial majority of the interests in the OP. The number of Common Units owned by the REIT is equal to the number of shares outstanding in the REIT.

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OR PROCEEDS

4. a	Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	
	Transfer Agent's Fees Printing and Engraving Costs Legal Fees Accounting Fees Engineering Fees Sales Commissions (specify finders' fees separately) Other Expenses (identify) Total	[] \$
b.	Enter the difference between the aggregate offering price given in response to Part C- Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."	There are no net proceeds in an exchange of assets for securities.
5.	Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.	
	Total in response to Fact of Question 418 and 18	Value of OP Units to Officers, Value of OP Units Directors & To Others Affiliates
	Salaries and fees	[]\$
	Purchase of real estate	[]\$
	Purchase, rental or leasing and installation of machinery and equipment	[]\$
	Construction or leasing of plant buildings and facilities	[]\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	[]\$o[]\$o
	Repayment of indebtedness	[]\$o_[]\$o
	Working capital	[]\$0 []\$_2,816,570,000
	Other (specify):	[]\$[]\$
	Column Totals	[]\$0 []\$_2,816,570,000
	Total Payments Listed (column totals added)	[ ]\$ <u>2,816,570,000</u>

D. FEDERAL SIGNATURI	D.	FED	ER.	AT.	SIG	NA	T	TRI
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The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under Rule 505, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the information furnished by the issuer to any non-accredited investor pursuant to paragraph (b)(2) of Rule 502.

Issuer (Print or Type)  CarrAmerica Realty Operating Partnership, L.P.	Kint A. Heisten	Date _July
By: CarrAmerica Realty Corporation, its sole General Partner		
Name of Signer (Print or Type)	Title of Signer (Print or Type)	
KURT A. HEISTER	SVP and Controller	

AT.	ΓEN	TIC	N

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)